

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	<i>W.A</i>		<i>06/25/01</i>
O.I.P.E. CLASSIFIER	<i>W</i>		<i>C-30-01</i>
FORMALITY REVIEW	<i>SA</i>	<i>1083</i>	<i>08/14/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	9/11/01
2	✓	✓	9/12/01
3	✓	✓	9/12/01
4	✓	✓	9/12/01
5	✓	✓	9/12/01
6	✓	✓	9/12/01
7	✓	✓	9/12/01
8	✓	✓	9/12/01
9	✓	✓	9/12/01
10	✓	✓	9/12/01
11	✓	✓	9/12/01
12	N	N	N
13	N	N	N
14	N	N	N
15	✓	✓	9/12/01
16	✓	✓	9/12/01
17	✓	✓	9/12/01
18	✓	✓	9/12/01
19	✓	✓	9/12/01
20	✓	✓	9/12/01
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25	✓	✓	9/12/01
26	✓	✓	9/12/01
27	✓	✓	9/12/01
28	✓	✓	9/12/01
29	✓	✓	9/12/01
30	✓	✓	9/12/01
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42	✓	✓	9/12/01
43	✓	✓	9/12/01
44	✓	✓	9/12/01
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47	✓	✓	9/12/01
48	✓	✓	9/12/01
49	✓	✓	9/12/01
50	✓	✓	9/12/01

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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E608-14-01